

POSITION	INITIALS	-ID NO.	DATE
FEE DETERMINATION	<i>PH</i>	<i>76331</i>	
O.I.P.E. CLASSIFIER			<i>7/15</i>
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	<i>SB</i>	<i>51222</i>	<i>8-22-08</i>

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	✓
2	✓
3	✓
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50	✓

Claim	Date
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If more than 150 claims or 10 actions  
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